

OCT 14 2003

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# **FEE TRANSMITTAL for FY 2003**

*Effective 01/01/2003. Patent fees are subject to annual revision.*

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 110)

Complete If Known	
Application Number	09/764,243
Filing Date	1/19/01
First Named Inventor	Stephen, M.
Examiner Name	W.D. Coleman
Art Unit	2823
Attorney Docket No	VISA-48

**METHOD OF PAYMENT** (check all that apply)

Check  Credit card  Money Order  Other  None

Deposit Account:

Deposit  
Account  
Number  
Deposit  
Account  
Name

19-0033

**Name**  
**The Commissioner is authorized to:** (check all that apply)  
Charge fee(s) indicated below  Credit any overpayments  
Charge any additional fee(s) during the pendency of this application  
Charge fee(s) indicated below, except for the filing fee  
the above-identified deposit account.

## **FEE CALCULATION**

**1. BASIC FILING FEE**

<u>Large Entity Fee</u>	<u>Small Entity Fee</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Code (\$)	Code (\$)		
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1) (\$)</b>			

## **2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

		Fee from below	Fee Paid
	Extra Claims		
Total Claims	<input type="text"/>	-20** = <input type="text"/> X <input type="text"/>	= <input type="text"/>
Independent Claims	<input type="text"/>	- 3** = <input type="text"/> X <input type="text"/>	= <input type="text"/>
Multiple Dependent			

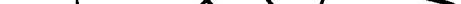
<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)**

| (\$)

*\*\*or number previously paid, if greater; For Reissues, see above*

**SUBMITTED BY**

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Signature			Date	October 10, 2003

**(Complete if applicable)**

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